

## Access to Care Monitoring Plan

### **The Draft Access Monitoring Review Plan is coming soon!**

In an effort to monitor Medicaid members' access to services, and in accordance with [42 CFR 447.203](#), the West Virginia Bureau for Medical Services (BMS) will be developing an Access Monitoring Plan. The Plan will outline the processes used to monitor Medicaid members' access to care in West Virginia.

The plan will measure access to care by analyzing administrative claims utilization data, rate comparison data analysis, and health quality survey data.

**The following service categories subject to this analysis as described in 42 CFR 447.203 are listed below:**

- Primary Care Services
- Physician Specialist Services
- Behavioral Health Services
- Pre- and Post-Natal Obstetric Services (including labor and delivery)
- Home Health Services

The draft plan will be posted on the West Virginia Bureau for Medical Services website for a 30 day public comment period prior to submission to the Centers for Medicare and Medicaid Services (CMS).

State Medicaid stakeholders, inclusive of providers and members, are encouraged to provide comments and feedback. Public comments may be incorporated throughout the final version of the plan and may influence access to care recommendations going forward.

In the final plan, BMS will make a determination regarding the sufficiency of access to care for Medicaid members in West Virginia and, if necessary, provide recommendations for improvement of any identified access deficiencies. These recommendations will be informed and supported by public input, health quality survey data, payment rate comparison, and administrative claim utilization analysis.